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ABSTRACT

Visits to more than 900 schools revealed that what is most longed for by teachers and students is a more caring environment. The Learning How to Care: Education for Parenting program (LHTC) curriculum for kindergarten through grade 12 was created to teach youth an alternative to violence and to link the concepts of parenting and caring. Caring is defined as a process involving an attitude of being concerned, an awareness of situations, a knowledge of possible choices and an ability to assess which alternative is best. It implies using the skills of problem-solving, planning, observing, listening, communicating, empathizing, brainstorming options, assessing the consequences of one's choices, and acting and reflecting on one's actions. From 1989 to 1991 the LHTC program was instituted in two inner city schools and anecdotal responses of participants are reported. The program was also conducted in parochial schools. The community dimension of LHTC is also discussed. Contains 49 references. (DR)

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LEARNING HOW TO CARE: A PARADIGM SHIFT IN HOME, SCHOOL AND COMMUNITY

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LEARNING HOW TO CARE:A PARADIGM SHIFT IN SCHOOL, HOME AND COMMUNITY

D. Murphy, with input from C. D'Anna, M. D'Anna, H. Heath, K. Towey

The problem:

In visiting over 900 schools D. Heath has found that what is most longed for by teachers and students is a more caring environment (1994). In fact, neither home nor school are the "safe zones" they once were but rather places where violence often appears commonplace. Posner (1994) has noted that "educators have neither the resources nor responsibility to change all the social factors that impel young children towards violence but they do have the power to make some changes in their schools "(p.2). Posner cites Guerra & Tolan (1994) who have found that many of the most promising school interventions involved families and supported the learning of effective parenting skills to improve caring in the home. They also found that effective school programs focused not just on helping improve parents/students social skills but on making the school environment more caring. Identification of parent support as a necessary ingredient for success indicates the complexity of the problem and the need to intervene in all areas of children's lives to effect real change.

H. Heath's curriculum for kindergarten through grade twelve entitled "Learning How to Care:Education for Parenting " (LHTC) (1995) is we believe a viable means of teaching youth an alternative to violence. Few link the skills involved in parenting and caring. Heath's curriculum does, and acquiring these skills and using them in schools, homes and communities is a means out of the cycle of violence and towards a more humane context for growth.

Caring Defined:

While many agree there is a need for caring in schools, homes and communities not all agree as to what is involved in caring. Heath defines parenting/caring as a process involving an attitude of being concerned, an awareness of situations, a knowledge of possible choices and an ability to assess which alternative is best. It implies a knowledge of goals, it implies skills of problem-solving, planning, observing, listening, communicating, empathizing, brainstorming options, assessing the consequences of one's choices, acting and reflecting on one's actions. Programs focusing primarily on building student self-esteem will not by themselves produce caring children. If students have high self-esteem but 1) do not want to care and do not see it as valued in society, 2) do not have the necessary information (e.g. knowledge of others needs, feelings, characteristics, capacities, etc.) and 3) do not have the necessary skills they will not be able to care.

Goals/of the LHTC Curriculum:

The primary goal of LHTC is to sensitize students to the

responsibility of parenting/caring for another and to provide them the information and skills necessary for assuming a caring role. Abusive parents often underestimate the time and attention a child needs and have unrealistic notions of what children can do.The LHTC curriculum addresses precursors to violent behavior by 1) bringing a parent and infant into a classroom at least once a month to share information on the difficulties and responsibilities involved in caring for a child 2) facilitating an understanding of the developmental needs of infants through observation in the classroom and 3) teaching children how to generate a variety of options when responding to the infant's needs. This process can and has been used in improving peer relations as well.

Learning How To Care Program in two Inner City Schools-1989-1991

Methodology/Evaluation-

D.Murphy & H. Heath provided LHTC orientation and program liaison/teacher training in two inner city Chicago schools at the beginning of the school year with provision for consultations throughout the year and for midyear workshops. The LHTC hired liaison and teachers worked to recruit school parents with infants or toddlers to serve as visiting families. Liaisons arranged monthly classroom visits and provided support for teachers and parents. Teachers had access to resource materials on how visits could be incorporated into student learning e.g. math, science, family life, health, social studies, reading and writing.

Evaluation options were available from Heath or Murphy and each site and liaison chose appropriate forms of consumer reactions and behavioral observations of visits. In addition, because of concerns with accountability a pre-post measures of student caring skills using Heath's measure of caring (1989) were administered in one school. This measure involved six pictures of infants/toddlers in differing situations. Students were tested individually and asked to describe 1) what they saw in the picture, 2) what might have happened before the picture was taken, 3) what might happen next, 4) all possible ways of dealing with the situation, 5) the best and most developmentally appropriate solution and 6) why they made each choice. These stories filled a research gap by focusing on the thinking process involved in caring.In year one process evaluation and program monitoring was stressed. The team agreed to obtain qualitative evaluations from one school and outcome evaluations on the other school with every third student in grades 5,6 and 7. Qualitative comments indicated that all but two students felt they benefitted from the program. The following responses by students,teachers and parents are typical: "The parenting program has good benefits towards kids. It scares the kid to death knowing that parents go through that much responsibility....having a baby isn't fun or a joke, it's real and they have to deal with it no matter what."(Student)

"I feel the students are more aware of each other as individuals. They appear to be more accepting of differences...Even those

students who are generally quiet or are not participants seem to enjoy the class. My class got to observe a loving, caring mom who is really involved with her children's development." (Teacher)

"The students get a realistic view of parenting. They see how much time, effort, money, etc. goes into parenting. I participate because so many young girls have babies and are really not ready to be a good parent....It has made me feel good about my parenting skills. I would love to see this program in every school (parent).

On Heath's caring measure, scores on 15 of 18 categories showed improvement in the expected direction, specifically in terms of a) making more accurate observations of situations, under-tanding age appropriate behavior, valuing the parent role, generating options for handling situations and choosing the most appropriate option. Significant findings were found in the area of detailed observations with three of the six pictures provided having significantly more detailed observations (picture a: $p=<.002$ b: $p=<.002$, e: $p=<.03$) in the post-test. Because the teachers focused on infants and less on the parent's role the first year scores in this area were not significantly different. Fortunately, having used open-ended questions with same aged students at the other school we found that an appreciation for the role was evident. One example is typical "I have learned that having a baby is a big responsibility for both the parents....You always have to watch them so they won't hurt themselves and they love experimenting on things" (Student). Finally, there were some modest improvements in knowledge of physical and social development.

In year one a control group was not used because it would be difficult to assess how much of the LHTC curriculum teachers could implement in this learning stage. Type III error was a concern. Teacher evaluations of program implementation indicated: 1) They believed in the usefulness and appropriateness of the program in schools. They also were convinced that with time it could be integrated into other curricula. 2) They felt that to be effective the program had to be part of a whole school that focused on caring and parenting/caring skills involved in human relationships. They clearly saw the skills learned in the visits as skills that could improve classroom management and student-student, student-teacher relations. 3) They recommended a more user friendly curriculum.4) Finally, they wanted us to involve the student's parents learning the caring paradigm with Heath's adult version of the program.

<u>Learning How to Care in School and Home: A Parochial Inner City School Involves Parents</u>

With start-up funds depleted, teachers in the original two inner city schools chose to integrate the caring paradigm in various ways without a liaison while we sought funds to revise the curriculum. In the meantime, Murphy was working with a principal in an inner city parochial school where staff wanted to make caring

the philosophy of the whole school. Heath with Murphy developed a two day workshop to help teachers plan how to create a caring school. They continued for the next year to work with these teachers to advance the caring paradigm in a) their manner of relating with staff, children and parents b) their manner of teaching and structuring learning c) their manner of guiding children (discipline) d) classroom content and e) their way of involving parents. Heath had been working with teachers in Pendle Hill in Pennsylvania where this comprehensive approach evolved. Emphasis was on process evaluation. As this was the first year to implement the program a control group was not sought out. The focus was on the process of implementing the caring paradigm which made parent-infant visits it's capstone experience. In the beginning of the year staff learned the school was being closed by the Catholic Archdiocese. This negatively impacted plans for implementation. Staff and parents were preoccupied with saving the school. Parent-infant visits were still welcome. Classes for school parents utilizing the caring paradigm provided a way for parents to deal with the school closing and plan for their children. In spite of this unexpected event that made implementation problematic, much was learned. It was possible to bring parents into the process and teachers to apply the caring paradigm to facilitate students caring in the classroom. Using this problem-solving model in classroom management had potential. However, teachers needed supervision and support. Though the abbreviated curriculum made it easier to lead classes independently they needed assistance in deciding the best way to implement this paradigm shift into class interactions.

The end of the year testing was problematic.Teachers would only schedule post-tests the last week of school. Students were distracted with the school closing and did not spend as much time as they had on the pre-test. Because of this we did not find significant differences while the program might have in fact been effective. We wanted students to consider the importance of the test but acknowledged their primary concerns were loss of school and friends. Time was spent on the evaluation of qualitative observations by students, teachers and visiting parents.

Results from teachers indicated that it is very important to have time to compare notes on implementation. Also, they need to leave extra time for reflection as parents are sometimes late. Even though the more user friendly curriculum draft was used and teachers seemed more confident, it was clear that they needed help in maximizing what was learned in the parent-infant visits. They needed individual consultation. Teachers had most difficulty understanding/applying the paradigm and leading classroom activities while recording observations on charts for teachers/class to note developmental change throughout the year. It was suggested that older students do this for teachers early on in the program.

Interviews of visiting parents were also informative. Parents felt participating helped them focus on the importance of their job and helped them communicate better with their children. "I was

watching his development more closely because I had to report back to the class" (visiting mother). Suggestions included more clarity regarding expectations of parents. Parents suggested allowing them to meet with teachers before visits. Both teacher and parents wanted consistency in time and format and clear expectations regarding their respective roles. One parent also asked for the students to keep a journal and present something to her at the end of the year so she could share it with her infant later.

In early spring as noted, a seven week parent group began utilizing the adult version of the caring paradigm entitled "Parents Planning." The advantage of this program is that parents bring in their own concerns/goals for children and learn to use the model to plan for individual children. Thus, in spite of it being a difficult time the program was well received and met an immediate need. While space limitations prevent detailed descriptions of the adult program (see attached description), it is a culturally sensitive program that helps parents identify their beliefs, goals, needs, feelings, characteristics and those of their children. Rather than tell them how to be good parents the caring paradigm is a framework or guide to make decisions that best meet their families' unique needs. There is an opportunity to learn there is more than one option in childrearing. The most noticeable change in this group was that after the seven sessions were finished some parents made less inferences about children's behavior and some provided more detailed descriptions of situations of concern to them. Others showed improvement in describing contexts, identifying feelings, and choosing options that met children's changing needs.

The Community Dimension of Learning How to Care

The community was and is involved in many ways in this model. Murphy has followed the principal of the closed school to her new setting. This Chicago area school hopes to involve local businesses to help in funding. In addition, teachers anticipate focusing on integrating caring themes into their curriculum. Thus, caring for the environment brings students into the community doing ecology projects, caring for the self allows them to learn and share drug education with others. In Social Studies themes of accepting diverse peoples are stressed. Parents are involved in working with children in the community e.g. visiting the elderly or doing clothing drives. Parents are introduced to the caring paradigm at an evening session and help to do at home what teachers are trying to do in school... create a more caring context where children can thrive. Parents and teachers are assisted in using the caring paradigm in their own interactions e.g. parent-teacher conferences or planning for individual children. Thus, one learns the caring paradigm is not just helpful in times of conflict but can be used to plan for any interaction. Non-parent volunteers are excellent community resources to assist teachers and staff create a caring school/community climate.

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Summary

Working from the class to the school to home and community and back to school demonstrates the need to work at all levels to make this a more caring world. This model is consistent with research findings cited in Posner (1994) that call for violence prevention programs involving not only children but their families and the school atmosphere itself. For further information regarding evaluation materials, the new user friendly curriculum, training and the three year school implementation plan contact Dana M. Murphy 1-312-973-7744, 6441 N. Wayne, Chicago,IL. 60626 or Harriet Heath, 223 Buck Lane, Haverford, PA. 19041. The Posner and Guerra & Tolan citations can be found in The Harvard Educational Newsletter,X(3), May/June, 1994, pp.1-4. The Adult Program including the caring paradigm and partial bibliography are attached.

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PARENTING CREATIVELY

Parenting Creatively is a model of parent education based on the premise that parents are the adults specified by society as responsible for their children and for their children's development until those children reach maturity. This responsibility makes parents the principle decision makers and planners for their children. Parenting Creatively acknowledges the parents' responsibility by:

1) recognizing with parents the importance of the parenting role in their own lives and that of their children.
2) leaving the decision making process with the parents.
3) helping parents become more confident in their decision making by providing relevant information drawn from the psychological and human development literature.
4) enabling parents to carry out plans with a greater sense of accomplishment by discussing/practicing various skills.

Parents in assuming their responsibility:

1) nourish, protect and nurture the developing persons.
2) provide children with their first in-depth human relationship.
3) provide children with opportunities to learn the values, knowledge and skills of the culture that the parent and/or society view as important. (This includes designing an environment where children can investigate, experiment, learn and become more competent.)

In developing Parenting Creatively the author reviewed the human development and psychological literature as well as observed and worked with parents to identify attitudes, information and skills parents use when caring for their children. These are available to parents in a manual, Parents Planning, and in an 8 week discussion series.In the discussion series parents raise issues related to child rearing and family living. These issues are then discussed by using a problem solving format based on the following questions:

*What is the situation and/or concern?
*What are the options?
*Choosing options depend upon answers to these questions:
What are the goals the parents have for the people involved?
What are the needs of those involved, (including parents)?
What are the characteristics of the individuals such as developmental level, temperament, previous history, interests,etc.?
What are the feelings of those involved?
*Making plans (planning)
*Implementing plans (doing)
*Looking back to plan ahead (reflecting)

Interspersed throughout the discussions are citings from child development theories and research findings; relevant parenting skills are practiced. This two-pronged approach, following the parents'interests while using a problem-solving approach, allows the discussion series to address the parents' concerns while making parenting a creative and challenging endeavor.

For further information, contact the author, Dr. Harriet Heath, 215-649-7037 or in Chicago, Dr. Dana M. Murphy, 312-973-7744.

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